## U.S.A. D ECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## SUSTAINED RELEASE HETERODISPERSE HYDROGEL SYSTEMS - AMORPHOUS DRUGS Title of Invention

	the specification of which (check one) X aniended on (if applicable). I hereby state that I have reviewed and und amendment referred to above. I acknowledge the duty to disclose all inform 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits unde listed below and have also identified below application on which priority is claimed.	erstand the contents on the contents on the contents of the co	of the above iden	atified specificat	ion, including the	claims, as amend	ined in Ti	
	PRIOR FOREIGN APPLICATION(S)							
	,					Priority claimed		
	(Number) (C	ountry)		(Day/Month/	Year Filed)	Yes	No	
	(Number) (C	ountry)		(Day/Month/	Year Filed)	Yes	No	
	paragraph of Title 35, United States Code, § Regulations, §1.56(a) which occurred betwee application:  (Application Serial Number)	en the filing date of the (Filing Date)	he prior applicat	ion and the nati	onal or PCT inte	mational filing da	e of this	
	And I hereby appoint Harold D. Steinberg, Registration No. 17,255, Martin G. Raskin, Registration No. 25,642, Clifford M. Davidson, Registration No. 32,728, and Michael N. Mercanti, Registration No. 33,966, James R. Crawford, Registration No. 39,155, and Laurence Manber, Registration No. 35,597, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith; correspondence address: STEINBERG, RASKIN & DAVIDSON, P.C., 1140 Avenue of the Americas, New York, N.Y. 10036; Telephone: (212) 768-3800; Fax: (212) 382-2124.  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
	Full name of sole or first Inventor Anand BAICHWAL		Full name	of joint		÷		
	Inventor's signature MBMW Date 4116/9/	MM	Inventor, i Second In Date	f anyventor's signatu	re			
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1	Full name of joint Inventor, if any		Full name Inventor, il	of joint			·	
	Third In .cntor's signature Date	· · · · · · · · · · · · · · · · · · ·	Fourth Inve	entor's signatur	· · · · · · · · · · · · · · · · · · ·			
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